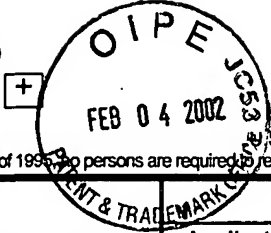


Please type a plus sign (+) inside this box



PTO/SB/08B (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Complete if Known

Application Number	10/023,567
Filing Date	December 17, 2001
First Named Inventor	BOOKER, III, ROBERT S., et al.
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	018803-002000US

Sheet 1 of 3

U.S. PATENT DOCUMENTS

Examiner Initials *	Cite No. ¹	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
<input checked="" type="checkbox"/>	AA	2,826,193		Vineberg	03/1958	
<input checked="" type="checkbox"/>	AB	3,455,298		Anstadt	07/1969	
<input checked="" type="checkbox"/>	AC	3,496,932		Prisk et al.	02/1970	
<input checked="" type="checkbox"/>	AD	3,613,672		Schiff	10/1971	
<input checked="" type="checkbox"/>	AE	4,048,990		Goetz	09/1977	
<input checked="" type="checkbox"/>	AF	4,192,293		Asrican	03/1980	
<input checked="" type="checkbox"/>	AG	4,536,893		Parravicini	08/1985	
<input checked="" type="checkbox"/>	AH	4,589,287		Dickens	05/1986	
<input checked="" type="checkbox"/>	AI	4,596,252		Nelson	06/1986	
<input checked="" type="checkbox"/>	AJ	4,603,705		Speicher et al.	08/1986	
<input checked="" type="checkbox"/>	AK	4,690,134		Snyders	09/1987	
<input checked="" type="checkbox"/>	AL	4,731,076		Noon et al.	03/1988	
<input checked="" type="checkbox"/>	AM	4,909,789		Taguchi et al.	03/1990	
<input checked="" type="checkbox"/>	AN	5,169,381		Snyders	12/1992	
<input checked="" type="checkbox"/>	AO	5,169,387		Kronner	12/1992	
<input checked="" type="checkbox"/>	AP	5,256,132		Snyders	10/1993	
<input checked="" type="checkbox"/>	AQ	5,269,319		Schulte et al.	12/1993	
<input checked="" type="checkbox"/>	AR	5,385,528		Wilk	01/1995	
<input checked="" type="checkbox"/>	AS	5,388,586		Lee et al.	02/1995	
<input checked="" type="checkbox"/>	AT	5,391,200		KenKnight et al.	02/1995	
<input checked="" type="checkbox"/>	AU	5,466,221		Zadini et al.	11/1995	
<input checked="" type="checkbox"/>	AV	5,484,391		Buckman, Jr. et al.	01/1996	
<input checked="" type="checkbox"/>	AW	5,496,345		Kieturakis et al.	03/1996	
<input checked="" type="checkbox"/>	AX	5,509,294		Gowing	04/1996	
<input checked="" type="checkbox"/>	AY	5,514,153		Bonutti	05/1996	
<input checked="" type="checkbox"/>	AZ	5,540,711		Kieturakis et al.	07/1996	
<input checked="" type="checkbox"/>	BA	5,545,214		Stevens	08/1996	
<input checked="" type="checkbox"/>	BB	5,571,074		Buckman, Jr. et al.	11/1996	
<input checked="" type="checkbox"/>	BC	5,573,517		Bonutti et al.	11/1996	
<input checked="" type="checkbox"/>	BD	5,582,580		Buckman, Jr. et al.	12/1996	
<input checked="" type="checkbox"/>	BE	5,593,418		Mollenauer	01/1997	
<input checked="" type="checkbox"/>	BF	5,601,581		Fogarty et al.	02/1997	
<input checked="" type="checkbox"/>	BG	5,601,590		Bonutti et al.	02/1997	
<input checked="" type="checkbox"/>	BH	5,607,443		Kieturakis et al.	03/1997	
<input checked="" type="checkbox"/>	BI	5,618,287		Fogarty et al.	04/1997	

RECEIVED
FEB - 7 2002
TC 8700 MAIL ROOM

Examiner Signature

K. Schaefer

Date Considered

4-2-04

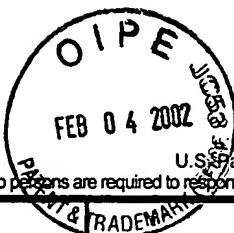
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.
PA 3195776 v1

Please type a plus sign (+) inside this box

+



PTO/SB/08B (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet **3** of **3**

Complete if Known

Application Number	10/023,567
Filing Date	December 17, 2001
First Named Inventor	BOOKER, III, ROBERT S., et al.
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	018803-002000US

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²
		Office ³	Number ⁴	Kind Code ⁵ (if known)				
<i>[Signature]</i>	CJ	WO	WO 98/05289			02/1998		

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
<i>[Signature]</i>	CK	Buckman, Jr. et al., "Direct cardiac massage without major thoracotomy: Feasibility and systemic blood flow," <i>Resuscitation</i> 29 (1995) 237-248	
<i>[Signature]</i>	CL	Buckman, Jr. et al., "Open-chest cardiac massage without major thoracotomy: metabolic indicators of coronary and cerebral perfusion," <i>Resuscitation</i> 34 (1997) 247-253	

PA 3195776 v1

RECEIVED
FEB -7 2002
TC 3700 MAIL ROOM

Examiner Signature	<i>K Schaefer</i>	Date Considered	4-2-04
-----------------------	-------------------	--------------------	--------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.
PA 3195776 v1